

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>RR</i>	<i>1292</i>	<i>1/10/00</i>
O.I.P.E. CLASSIFIER	<i>RR</i>	<i>52</i>	<i>1/23</i>
FORMALITY REVIEW	<i>RR</i>	<i>760291</i>	<i>1/29</i>
RESPONSE FORMALITY REVIEW			<i>5/10/00</i>

# INDEX OF CLAIMS

**BEST AVAILABLE COPY**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
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45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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